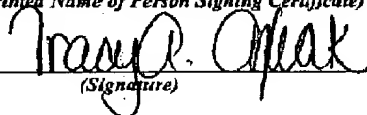
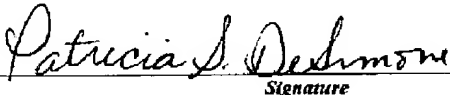



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 08CU5777-2	
Applicant(s): Sundararaj, et al.				
Application No. 09/855,052	Filing Date May 14, 2001	Examiner Moore	Group Art Unit 1712	
Invention: POLYIMIDE BLENDS, METHOD OF MAKING, AND ARTICLES MADE THEREFROM				
<p>Petition for Extension of Time Under 37 CFR 1.136(a) (1 page); I hereby certify that this <u>RCE (1 page); Amendment Transmittal (1 page); Amendment (28 pages)</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9306</u>) on <u>September 13, 2004</u> (Date)</p> <p style="text-align: center;"><u>Tracy A. Axiak</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>				

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 08CU5777-2	
Applicant(s): Sundararaj, et al.					
Application No. 09/855,052	Filing Date May 14, 2001	Examiner Moore	Customer No. 23413	Group Art Unit 1712	Confirmation No. 8668
Invention: POLYIMIDE BLENDS, METHOD OF MAKING, AND ARTICLES MADE THEREFROM					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	39 -	56 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	6 -	3 =	3 x	\$84.00	\$252.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$252.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 07-0862 in the amount of \$252.00 <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 07-0862 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Patricia S. DeSimone Registration No. 48,137 Customer No. 23413 Phone No. (860) 286-2929			Dated: September 13, 2004		
CC:			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on September 13, 2004 . (Date)		
			 Signature of Person Mailing Correspondence		
			Tracy A. Axiak (VIA FACSIMILE) Typed or Printed Name of Person Mailing Correspondence		

P11LARGE/REV08

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